

Division of Corporations

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Division of Corporations

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FOREIGN PROFIT/NONPROFIT CORPORATION

Wedeço, Inc.

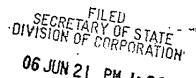
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6/21/2006



APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607. 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

79.) 0		, et:
Wedsoo, Inc.		`#
	orporation; must include "INCORPORA"	TED, "COMPANY," "CORPORATION,"
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")	
	* *	<u> </u>
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		*`ja
(If name unavail	able in Florida, enter alternate corporate	name adopted for the purpose of transacting business in Florida)
~ 1		B0 001 4500
Delaware	1.4.1.6.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	3. 23-2914590
(State or country	under the law of which it is incorporated	(PEI number, if applicable)
05/21/1997		5. Perpenual
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
•		(management and addition of the foreign)
06/12/2006		
		ness in Florida, if prior to registration)
	(SEE SECTIONS 607.1501 & 6	607.1502, F.S., to determine penalty liability)
14125 South Brid	ge Circle, Charlotte, NC 28273	J
<u> </u>	(Principal office	(sarbha n:
	•	
4 West Red Oak	Lame White Plains, NY 10604	,
	(Curent mailin	re address)
Sintaire	if unter mrification ecotomo	
	of water purification systems.	
		e or country to be carried out in state of Florida)
(Purpose(1	of corporation authorized in home state	e or country to be carried out in state of Plorida)
(Purpose(1		e or country to be carried out in state of Plorida)
(Purpose(1	of corporation authorized in home state	e or country to be carried out in state of Plorida)
(Purpose(s	 of corporation authorized in home state at address of Florida registered agent: 	e or country to be carried out in state of Plorida)
(Purpose(s Name and <u>stree</u> Name:	 of corporation authorized in home state at address of Florida registered agent: 	e or company to be carried out in state of Plorida) : (P.O. Box NOT acceptable)
(Purpose(s Name and <u>stree</u> Name:	c) of corporation authorized in home state at address of Florida registered agent: CT Corporation System	e or company to be carried out in state of Plorida) : (P.O. Box NOT acceptable)
(Purpose(s Name and <u>stree</u> Name:	c) of corporation authorized in home state address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation	e or country to be carried out in state of Florida) (P.O. Box NOT acceptable)
(Purpose(s Name and <u>stree</u> Name:	c) of corporation authorized in home state address of Florida registered agent: C T Corporation System 1200 South Pine Island Road	e or country to be carried out in state of Florida) : (P.O. Box NOT acceptable)
(Purpose(i Name and <u>stree</u> Name: ffice Address:	c) of corporation authorized in home state address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation (City)	e or country to be carried out in state of Florida) (P.O. Box NOT acceptable)
(Purpose(s) Name and street Name: ffice Address:	c) of corporation authorized in home state address of Florida registered agent: C T Corporation System 1200 South Pins Island Road Plantation (City)	e or country to be carried out in state of Florida) : (P.O. Box NOT acceptable)
(Purpose(s) Name and street Name: ffice Address: D. Registered as a faving been name	c) of corporation authorized in home state address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept	e or country to be carried out in state of Florida) : (P.O. Box NOT acceptable)
(Purpose(s) Name and street Name: fffice Address: D. Registered as faving been names in this	c) of corporation authorized in home state address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept application, I hereby accept the app	e or country to be carried out in state of Florida) : (P.O. Box. NOT acceptable)
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(Purpose(s) Name and street Name: Mane: Milce Address: O. Registered as a faving been names a signature of this arther agree to contact the street of the s	c) of corporation authorized in home state address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept application, I hereby accept the app comply with the provisions of all state with and accept the obligations of re-	e or country to be carried out in state of Florida) : (P.O. Box. NOT acceptable)
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(Purpose(s) Name and street Name: Mane: Milce Address: O. Registered as a faving been names in this surther agree to condition and I am familian	c) of corporation authorized in home state address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept application, I hereby accept the app comply with the provisions of all state with and accept the obligations of re-	e or country to be carried out in state of Florida) (P.O. Box. NOT acceptable) , Florida 33324 (Zip code) service of process for the above stated corporation at the cointment as registered agent and agree to act in this cap ates relative to the proper and complete performance of the position as registered agent. Melissa Fox Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the Jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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DIRECTORS		
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Chairman:	*	
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octor:		
ress:		
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sctor;		
lress:		
* ************************************		
sident: SEE ATTACHMENT dress:		
e President:	\$3 	
iress:		
etury:		
ress:		
asire:		
iress:		
TE: If necessary, you may attach an adde	ndum to the application listing additional officers and/or directors.	
Maria Toutzato	· , 4	
(Signature of Director	or Officer listed in number 12 of the application)	
Maria Tzurtzatos, Asst. Secretary	$\mathbf{e}_{i,j}$	

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DIVISION OF CORPORATION

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Wedeco, Inc.

OFFICERS

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President	Lensford C. Cruso	14123 South Bridge Circle, Charlotte, N.C. 28275
Vice President	Charles Reading	14125 South Bridge Circle, Charlotte, N.C. 28273
Vice President/Treasurer/Controller	Scott J. Miller	14125 South Bridge Citole, Charlotte, N.C. 28273
Vice President / General Courses	Andrew DeCicco	10 Mountainview Road, Upper Saddle River, NJ 07432
Secretary	Julia Zeremaki	14125 South Bridge Circle, Charlotte, N.C. 28273
Vice President/ Assistant Secretary	Jane Docson	10 Mountainview Road, Upper Saddie River, NJ 07432
Assistant Secretary/ Assistant Tressurer	Valoria Doyle	4 West Red Oak Lane, White Pistors, NY 10804
Assistant Secretary	Maria Tyortzalos	4 West Red Oak Lane, White Plains, NY 10504

DIRECTORS

(A. 11. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	The second of th
Lensford C. Cruse	14125 South Bridge Circle, Charlotte, N.C. 28273
Scott J. Miller	14125 South Bridge Circle, Charlotte, N.C. 28273
Charles Randing	14125 South Bridge Circle, Chartotte, N.C. 28273

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WEDECO, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF JUNE, A.D. 2006.

AND I DO HEREBY FURTHER CRRTIFY THAT THE SAID "WEDECO, INC."
WAS INCORPORATED ON THE THENTY-FIRST DAY OF MAY, A.D. 1997.

AND I DO HEREBY FORTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY PURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2753551 8300 060586109



Darriet Smith Hindre

Harrier Smith Windsor, Secretary of States
AUTHENTICATION: 4835822

DATE: 06-19-06

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